

# MISSOURI DIVISION OF HEALTH - STANDARD CERTIFICATE OF DEATH

DEPARTMENT OF PUBLIC HEALTH AND WELFARE

**63-049128**

STATE FILE NUMBER

DO NOT WRITE  
ON THIS STUB

AMENDED

Registration District No. 310 Primary Registration District No. 3058 Registrar's No. 18572

**FILED DEC 20 1963**

1. PLACE OF DEATH		2. USUAL RESIDENCE (Where deceased lived. If institution: Residence before admission)	
a. COUNTY <b>St Charles</b>	b. CITY (If outside corporate limits, give TOWNSHIP only) <b>St Charles</b>	a. STATE <b>Mo</b>	b. COUNTY <b>St Charles</b>
c. FULL NAME OF (If NOT in hospital, give location) HOSPITAL OR INSTITUTION <b>Carmelite Home</b>		d. STREET ADDRESS <b>723 Clay St</b>	Inside Limits Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Reside on Farm Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
3. NAME OF DECEASED (Type or print)		4. DATE OF DEATH	
First Middle Last <b>Blanche Bode</b>		Month Day Year <b>Dec. 13 1963</b>	
5. SEX <b>Male</b>	6. COLOR OR RACE <b>White</b>	7. Married <input type="checkbox"/> Never Married <input type="checkbox"/> Widowed <input checked="" type="checkbox"/> Divorced <input type="checkbox"/>	8. DATE OF BIRTH <b>5/23/1874</b>
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) <b>House Keeper</b>		10b. KIND OF BUSINESS OR INDUSTRY <b>Home</b>	9. AGE (last birthday) <b>89</b>
11a. FATHER'S NAME <b>Charles Rechtern</b>		11b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
12a. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service) <b>No</b>		12b. SOCIAL SECURITY NO. <b>None</b>	
13a. FATHER'S NAME <b>Charles Rechtern</b>		13b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
14a. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service) <b>No</b>		14b. SOCIAL SECURITY NO. <b>None</b>	
15a. FATHER'S NAME <b>Charles Rechtern</b>		15b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
16a. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service) <b>No</b>		16b. SOCIAL SECURITY NO. <b>None</b>	
17a. FATHER'S NAME <b>Charles Rechtern</b>		17b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
18a. FATHER'S NAME <b>Charles Rechtern</b>		18b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
19a. FATHER'S NAME <b>Charles Rechtern</b>		19b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
20a. FATHER'S NAME <b>Charles Rechtern</b>		20b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
21a. FATHER'S NAME <b>Charles Rechtern</b>		21b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
22a. FATHER'S NAME <b>Charles Rechtern</b>		22b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
23a. FATHER'S NAME <b>Charles Rechtern</b>		23b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
24a. FATHER'S NAME <b>Charles Rechtern</b>		24b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
25a. FATHER'S NAME <b>Charles Rechtern</b>		25b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
26a. FATHER'S NAME <b>Charles Rechtern</b>		26b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
27a. FATHER'S NAME <b>Charles Rechtern</b>		27b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
28a. FATHER'S NAME <b>Charles Rechtern</b>		28b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
29a. FATHER'S NAME <b>Charles Rechtern</b>		29b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
30a. FATHER'S NAME <b>Charles Rechtern</b>		30b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
31a. FATHER'S NAME <b>Charles Rechtern</b>		31b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
32a. FATHER'S NAME <b>Charles Rechtern</b>		32b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
33a. FATHER'S NAME <b>Charles Rechtern</b>		33b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
34a. FATHER'S NAME <b>Charles Rechtern</b>		34b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
35a. FATHER'S NAME <b>Charles Rechtern</b>		35b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
36a. FATHER'S NAME <b>Charles Rechtern</b>		36b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
37a. FATHER'S NAME <b>Charles Rechtern</b>		37b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
38a. FATHER'S NAME <b>Charles Rechtern</b>		38b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
39a. FATHER'S NAME <b>Charles Rechtern</b>		39b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
40a. FATHER'S NAME <b>Charles Rechtern</b>		40b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
41a. FATHER'S NAME <b>Charles Rechtern</b>		41b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
42a. FATHER'S NAME <b>Charles Rechtern</b>		42b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
43a. FATHER'S NAME <b>Charles Rechtern</b>		43b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
44a. FATHER'S NAME <b>Charles Rechtern</b>		44b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
45a. FATHER'S NAME <b>Charles Rechtern</b>		45b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
46a. FATHER'S NAME <b>Charles Rechtern</b>		46b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
47a. FATHER'S NAME <b>Charles Rechtern</b>		47b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
48a. FATHER'S NAME <b>Charles Rechtern</b>		48b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
49a. FATHER'S NAME <b>Charles Rechtern</b>		49b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
50a. FATHER'S NAME <b>Charles Rechtern</b>		50b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
51a. FATHER'S NAME <b>Charles Rechtern</b>		51b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
52a. FATHER'S NAME <b>Charles Rechtern</b>		52b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
53a. FATHER'S NAME <b>Charles Rechtern</b>		53b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
54a. FATHER'S NAME <b>Charles Rechtern</b>		54b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
55a. FATHER'S NAME <b>Charles Rechtern</b>		55b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
56a. FATHER'S NAME <b>Charles Rechtern</b>		56b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
57a. FATHER'S NAME <b>Charles Rechtern</b>		57b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
58a. FATHER'S NAME <b>Charles Rechtern</b>		58b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
59a. FATHER'S NAME <b>Charles Rechtern</b>		59b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
60a. FATHER'S NAME <b>Charles Rechtern</b>		60b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
61a. FATHER'S NAME <b>Charles Rechtern</b>		61b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
62a. FATHER'S NAME <b>Charles Rechtern</b>		62b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
63a. FATHER'S NAME <b>Charles Rechtern</b>		63b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
64a. FATHER'S NAME <b>Charles Rechtern</b>		64b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
65a. FATHER'S NAME <b>Charles Rechtern</b>		65b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
66a. FATHER'S NAME <b>Charles Rechtern</b>		66b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
67a. FATHER'S NAME <b>Charles Rechtern</b>		67b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
68a. FATHER'S NAME <b>Charles Rechtern</b>		68b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
69a. FATHER'S NAME <b>Charles Rechtern</b>		69b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
70a. FATHER'S NAME <b>Charles Rechtern</b>		70b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
71a. FATHER'S NAME <b>Charles Rechtern</b>		71b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
72a. FATHER'S NAME <b>Charles Rechtern</b>		72b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
73a. FATHER'S NAME <b>Charles Rechtern</b>		73b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
74a. FATHER'S NAME <b>Charles Rechtern</b>		74b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
75a. FATHER'S NAME <b>Charles Rechtern</b>		75b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
76a. FATHER'S NAME <b>Charles Rechtern</b>		76b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
77a. FATHER'S NAME <b>Charles Rechtern</b>		77b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
78a. FATHER'S NAME <b>Charles Rechtern</b>		78b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
79a. FATHER'S NAME <b>Charles Rechtern</b>		79b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
80a. FATHER'S NAME <b>Charles Rechtern</b>		80b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
81a. FATHER'S NAME <b>Charles Rechtern</b>		81b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
82a. FATHER'S NAME <b>Charles Rechtern</b>		82b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
83a. FATHER'S NAME <b>Charles Rechtern</b>		83b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
84a. FATHER'S NAME <b>Charles Rechtern</b>		84b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
85a. FATHER'S NAME <b>Charles Rechtern</b>		85b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
86a. FATHER'S NAME <b>Charles Rechtern</b>		86b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
87a. FATHER'S NAME <b>Charles Rechtern</b>		87b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
88a. FATHER'S NAME <b>Charles Rechtern</b>		88b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
89a. FATHER'S NAME <b>Charles Rechtern</b>		89b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
90a. FATHER'S NAME <b>Charles Rechtern</b>		90b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
91a. FATHER'S NAME <b>Charles Rechtern</b>		91b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
92a. FATHER'S NAME <b>Charles Rechtern</b>		92b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
93a. FATHER'S NAME <b>Charles Rechtern</b>		93b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
94a. FATHER'S NAME <b>Charles Rechtern</b>		94b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
95a. FATHER'S NAME <b>Charles Rechtern</b>		95b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
96a. FATHER'S NAME <b>Charles Rechtern</b>		96b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
97a. FATHER'S NAME <b>Charles Rechtern</b>		97b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
98a. FATHER'S NAME <b>Charles Rechtern</b>		98b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
99a. FATHER'S NAME <b>Charles Rechtern</b>		99b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	
100a. FATHER'S NAME <b>Charles Rechtern</b>		100b. MOTHER'S MAIDEN NAME <b>Ellen Becker</b>	

USE BLACK INK  
OR  
TYPEWRITER RIBBON

AMENDMENTS ON THIS RECORD ARE AS FOLLOWS

DATE AMENDED

INSTEAD OF

ITEM NO. SHOULD READ

DOCUMENT

BY AFFIDAVIT OF

MEDICAL CERTIFICATION

19. WAS AUTOPSY PERFORMED? YES <input type="checkbox"/> NO <input type="checkbox"/>	20a. ACCIDENT <input type="checkbox"/> SUICIDE <input type="checkbox"/> HOMICIDE <input type="checkbox"/>	20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in PART I or PART II of item 18.)
20c. TIME OF INJURY Hour a.m. p.m. Month, Day, Year	20d. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input type="checkbox"/>	20e. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg., etc.)
20f. CITY, TOWN, OR LOCATION	COUNTY	STATE
21. I attended the deceased from <u>Dec. 1960</u> to <u>Dec. 13, 1963</u> and last saw her alive on <u>Dec. 13, 1963</u> Death occurred at <u>6:30 p</u> m on the date stated above, and to the best of my knowledge, from the causes stated.		22c. DATE SIGNED <u>Dec. 15, 1963</u>
22a. SIGNATURE <u>E. J. Canty M.D.</u>	22b. ADDRESS <u>114 W. Main St. St. Charles Mo</u>	22c. DATE SIGNED <u>Dec. 15, 1963</u>
23a. BURIAL, CREMATION, REMOVAL (Specify) <u>Burial</u>	23b. DATE <u>12/15/63</u>	23c. NAME OF CEMETERY OR CREMATORY <u>Oak Grove Cemetery</u>
23d. LOCATION (City, town, or county) <u>St Charles Mo.</u>	23e. DATE RECD. BY LOCAL REG. <u>Dec 16 - 1963</u>	23f. REGISTRAR'S SIGNATURE <u>Mabel Zimmwalt Depo</u>
24. FUNERAL DIRECTOR <u>Arthur C Baue Funeral Home</u>		24. ADDRESS <u>St Charles Mo.</u>

(Licensed Embalmer's Statement on Reverse Side)

JAN 14 1964

**STATEMENT BY LICENSED EMBALMER**

I hereby certify that the body whose name is recorded on the reverse side of this certificate was embalmed by me,  
or by \_\_\_\_\_, Student Embalmer No. \_\_\_\_\_  
working under my personal supervision.

Student \_\_\_\_\_  
Signature of Student Embalmer

Signed Connie L. Pickering

Licensed Embalmer No. 5189

P. O. Address St. Charles Mo

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license).

If embalmed by a STUDENT, he also shall sign in his OWN handwriting.

If this body is not embalmed, fact should be so stated above.